

## Correspondence

The July, 1924, number of CALIFORNIA AND WESTERN MEDICINE carried an editorial entitled "Fantastic Schemes for Formularizing and Socializing Medicine." Many messages commendatory of the editorial have been received, and one letter written on the stationery of the Public Health Center of Alameda County is as follows:

October 17, 1924.

Dr. W. E. Musgrave, Editor California and Western Medicine, Balboa Building, San Francisco, California.

My dear Doctor Musgrave—In a recent issue of California and Western Medicine (Vol. XXII, No. 7) there was an editorial headed "Fantastic Schemes for Formularizing and Socializing Medicine." The conclusions in the editorial were apparently drawn from extracts from an article, "Health Surveys in the Oakland Public Schools," in the Alameda County Public Health News (Vol. II, No. 3), as frequent quotations from this article are given. The article states, in italics, that "it is findings like these upon which parents rely to safeguard the health and lives of their children."

Knowing that it is the desire of California and Western Medicine to be entirely fair, the Board of Directors (Public Health Center), to whose attention the criticism was called, have instructed me to make a reply, knowing that your idea of fair play will be such that you will publish it.

The purpose of these health surveys seems to have been misunderstood and other parts of the article quoted overlooked. As stated in the article, "you will notice that at no time (as based upon this survey) has a diagnosis been made; merely the fact recorded that a defect is suspected." The survey is a series of simply objective tests recommended by leading specialists about the San Francisco Bay who had in mind the method in which they were to be used, and are intended to find the children that are apparently well, so that they may be eliminated from special attention.

"To verify the survey findings and to gain the co-operation of the parents in the promotion of their children's health, eleven community centers have been established. The doctor is in each of these centers one morning or afternoon a week." "With the parent or guardian of the child present, the physician makes a thorough examination." The children are seen by appointment only, and the physician himself regulates the number of appointments. Each doctor sees on an average from three to five children an hour "conferring (with the parent) as to the best way of improving the child's health. If there is a family physician or dentist, the child is referred to him by the school doctor on a form provided. If not, the parents are advised to select and consult one. Should they state they are unable to pay for medical service, they are referred to the medical social service department at the treatment clinic of the Public Health Center, a card being given stating time and place."

Yours very sincerely,  
ALVIN POWELL, M. D.,  
Director.

*Comment*—Yes, we don't.

Dear Doctor—I have just been reading the article on throat swabs in the enclosed bulletin (official bulletin, State Board of Health), and am mad.

We have enough slams from the lay health worker, etc., at present, without a member of our profession in an official position going out of his way to furnish them with ammunition.

Since when have laboratory technicians developed a system of ethics or a sense of responsibility?

Since when have the ethics and honor of the average M. D. been improved and purified by his acceptance of a

political job so that he may be trusted beyond the rank and file of our profession?

I have known a health officer to put a scarlet fever patient of his own in a back room, with the sign on the door of the room; nothing on the front of the house, and then allow the sister of the patient to give music lessons to children in the front rooms.

I have known of the assistant to a health officer to hand the swab to a 7-year-old boy and tell him to take the culture, etc., etc.  
(Signed) DOCTOR X—

*Note*—The paragraph referred to by the writer reads:

"The importance of absolute exactness in diphtheria diagnosis, made possible by correct report of cultures from the throat and nose, makes obvious the necessity of a proper technique in taking swabbings for cultural tests for diphtheria. Even so simple a procedure is often inadequately or carelessly done with a resulting report which may mislead. *Laboratory technicians* sometimes wonder if poor swabbings are not sent intentionally to obtain negative findings. For release, it has been deemed safer to have the swab taken by the *health officer* or his *assistant*."

STATE BOARD MEDICAL EXAMINERS

Sacramento, Calif., November 6, 1924.

Re: Anesthesia.

Dear Dr. Musgrave—Our legal department has held that the giving of an anesthetic by a nurse constitutes a violation of the Medical Practice Act.

In the standardization of hospitals, does your committee make any point of this important feature; i. e., is it required that anesthetics in an approved hospital must be given by one licensed under the Medical Practice Act in the state of California?

Very truly yours,

C. B. PINKHAM, M. D.,  
Secretary-Treasurer.

CALIFORNIA AND WESTERN MEDICINE

December 3, 1924.

Dear Doctor Pinkham—This is in reply to your letter inquiring whether or not we will accredit a hospital where anesthetics are given by other than licensed individuals.

In view of the fact that the Council on Medical Education and Hospitals of the American Medical Association, in consequence of your similar inquiry to them, has invited my comment upon the same point, it seems advisable to again answer this question rather fully.

We have not required that anesthetics be given only by an educated physician in our hospital betterment work, except in those hospitals purporting to teach anesthesiology.

Some years ago the House of Delegates of the California Medical Association passed unanimously a resolution recognizing the giving of an anesthetic as the practice of medicine and created an anesthesiology section in the California Medical Association. The opinion of the attorney of your Board of Medical Examiners, as well as an opinion of the Attorney-General, to the effect that the giving of an anesthetic by other than one licensed to practice the healing art constituted a violation of the laws of California was important evidence in influencing the California Medical Association to take the action it did.

Since that time, in hundreds of public addresses, letters, personal visits to hospitals, and repeatedly in CALIFORNIA AND WESTERN MEDICINE and in BETTER HEALTH, I have urged that, inasmuch as we have made anesthesiology the practice of medicine in principle, that we follow that principle to its logical conclusion in practice. This I have done as chairman of the Hospital Betterment Service of the League for the Conservation of Public Health, which committee, as you know, has by delegation of authority represented the California Medical Association and the Council on Medical Education and Hospitals of the American Medical Association for years in the hospital work in California.

With the co-operation of your board, the three Class A medical schools of the state and the members of the Section on Anesthesiology, the League was able to secure an